

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Lynn Glover
 Sheriff
 Houston Co. Ga.
 1601 E M. St.
 Dothan Al 36301

A. Signature	
X	
B. Received by (Printed Name)	
Nancy P. L.	
C. Date of Delivery	
4/12/06	
D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:	
06305	

3. Service Type

Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

Restricted Delivery? (Extra Fee)

 Yes

2. Article Number

(Transfer from serial number)

7005 1620 0002 3461 3059

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540